

Staple Issue Slip Here

POSITION	ID NO.	DATE
CLASSIFIER		
EXAMINER	43	5-12-93
TYPIST	323	5/18
VERIFIER	314	5-24-93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Final	Original	Claim	Date
1	1	1	7-1-93
2	2	2	12-7-93
3	3	3	6-30-94
4	4	4	11-3-23-99
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

Final	Original	Claim	Date
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Best Available Copy